SCHEDULE A (FEC Form 3X)

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 483 / 1821 (check only one) X 11a 11b 11c 12 13 14 15 16 17	
An or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	y not be sold or used by any perso dress of any political committee to		
\rangle	NAME OF COMMITTEE (In Full) Lyndon LaRouche PAC				
۹.	Full Name (Last, First, Middle Initial) WINIFRED W INGRAM Mailing Address 10 BONNIE LN			Date of Receipt	
	P.O. BOX 172 City State Zip Code			0 3 2 9 2 0 0 6 Transaction ID: CASHIN00102943721001	
	TOWACO	NJ	07082	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	С		200.00	
	Name of Employer N/A	Occupatio RETIREI			
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary ☐ General Other (specify) ▼		1000.00		
3.	Full Name (Last, First, Middle Initial) GRACE A JACKSON			Date of Receipt	
	Mailing Address 550 SCHENECTADY AVE			03 17 YYYY 2006	
	ty State Zip Code			Transaction ID: CASHIN00102925541001	
	BROOKLYN	NY	11203	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	С		250.00	
	Name of Employer AMALGAMATED LIFE		NCE CLAIMS CLERK		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00		
- C.	Full Name (Last, First, Middle Initial) CHARLES D JAFFE			Date of Receipt	
	Mailing Address 380 RIVERSIDE DR #4K			0 1 0 4 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City State Zip Code			Transaction ID: CASHIN00102797191001	
	NEW YORK	NY	10025	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		100.00	
	Name of Employer SELF-EMPLOYED	Occupatio PHARMA	n ACIST/CONSULTANT		
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 600.00		
SUBTOTAL of Receipts This Page (optional)				550.00	
T	OTAL This Period (last page this line number or	nlv)			